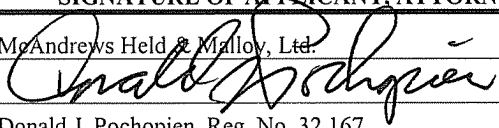
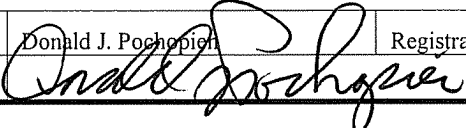
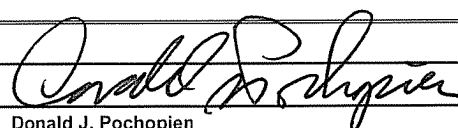


<b>TRANSMITTAL FORM</b>		Application Number		09/976,556			
(to be used for all correspondence after initial filing)		Filing Date		October 11, 2001			
		First Named Inventor		Wironen, et al.			
		Art Unit		1651			
		Examiner Name		Leon B. Langford, Jr.			
Total Number of Pages in This Submission		23	Attorney Docket Number		1915/13987US04		
<b>ENCLOSURES (check all that apply)</b>							
<table border="0" style="width: 100%;"> <tr> <td style="vertical-align: top; width: 33%;"> <input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Response Under 37 CFR §1.116 with Exhibits A-C attached thereto  <input checked="" type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request              – 2 months  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53       </td> <td style="vertical-align: top; width: 33%;"> <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD       </td> <td style="vertical-align: top; width: 33%;"> <input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC              <i>(Appeal Notice, Brief, Reply Brief)</i>  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Return-Receipt Postcard  <input type="checkbox"/> Other Enclosure(s) (please identify below):       </td> </tr> </table>					<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Response Under 37 CFR §1.116 with Exhibits A-C attached thereto <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request – 2 months <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return-Receipt Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Response Under 37 CFR §1.116 with Exhibits A-C attached thereto <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request – 2 months <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return-Receipt Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below):					
Remarks							
<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>							
Firm	McAndrews Held & Malloy, Ltd.						
Signature							
Printed Name	Donald J. Pochopien, Reg. No. 32,167						
Date	August 21, 2006						
<b>CERTIFICATE OF MAILING</b>							
I hereby certify that this correspondence is being sent via electronic filing to the United States Patent and Trademark Office on August 21, 2006.							
Name (Print/type)	Donald J. Pochopien	Registration No. (Attorney/Agent)	32,167				
Signature			Date	August 21, 2006			

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004 Fees pursuant to the consolidated Appropriates Act, 2005 (H.R. 4818). <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2006</h3>		<b>Complete if Known</b>					
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	09/976,556				
		Filing Date	October 11, 2001				
		First Named Inventor	Wironen, et al.				
		Examiner Name	Leon B. Langford, Jr.				
		Art Unit	1651				
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 450.00		Attorney Docket No.	1915/13987US04				
METHOD OF PAYMENT (check all that apply)							
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____							
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 13-0017 Deposit Account Name: McAndrews Held & Malloy For the above-identified deposit account, the Director is hereby authorized to (check all that apply)							
<input checked="" type="checkbox"/> Charge Fee(s) indicated below <input type="checkbox"/> Charge Fee(s) indicated below, except for the filing fee							
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fees(s) <input checked="" type="checkbox"/> Credit any overpayments under 37 CFR 1.16 and 1.17							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
<b>FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Small Entity Fee(\$)</u>	<u>Fee(\$)</u>	<u>Small Entity Fee(\$)</u>	<u>Fee(\$)</u>	<u>Small Entity Fee(\$)</u>	<u>Fees Paid(\$)</u>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
							<b>Small Entity</b>
							<u>Fee(\$)</u> <u>Fee(\$)</u>
Each claim over 20 (including Reissues)							50 25
Each independent claim over 3 (including Reissues)							200 100
Multiple dependent claims							360 180
<u>Total Claims</u>		<u>Extra Claims</u>	<u>Fee(\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>		
_____ -20 or HP		x	=	_____	<u>Fee</u>	<u>Fee Paid (\$)</u>	_____
HP = highest number of total claims paid for, if greater than 20							
<u>Indep. Claims</u>		<u>Extra Claims</u>	<u>Fee(\$)</u>	<u>Fee Paid (\$)</u>			
_____ -3 or HP		x	=	_____			
HP = highest number of independent claims paid for, if greater than 3							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>			<u>Fee(\$)</u>	<u>Fee Paid(\$)</u>	
_____ -100	_____ /50	_____ (round up to a whole number)			x	=	_____
							<b>Fee Paid(\$)</b>
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)							_____
Other (e.g., late filing surcharge): Petition For 2 Month Extension Of Time							450.00
<b>SUBMITTED BY</b>							
Signature				Registration No. (Attorney/Agent)	32,167	Telephone	(312)775-8000
Name (print/type)	Donald J. Pochopien			Date	August 21, 2006		